

GSA Club
Parental Permission Slip

The Gay-Straight Alliance (GSA) is a student-run club which provides a safe place for students to meet, support one another, plan activities, and bring awareness to issues impacting them in their community and school. It is an all-inclusive group that promotes friendship and feelings of belonging in an effort to cultivate a safe environment for all of our Career Path High students.

I, _____, parent and/or guardian of _____, give permission for my student to participate in GSA Club on Tuesdays from 11:30-12:00. I acknowledge that my student is responsible for their behavior while being a member of the GSA Club and they are expected to be respectful, responsible, and positive. I understand that if my student's behavior does not comply with club and instructor standards, they will receive a warning. If poor behavior continues, they will no longer be able to participate with the club.

Parent Name: _____

Parent Signature: _____

Emergency Contact: _____

Emergency Contact Number: _____

I, _____, student at Career Path High, acknowledge that I understand I must act with respect, responsibility, and positivity at all times. I acknowledge that I will be interacting with a different community that has different requirements and expectations. I will be willing to participate with an open mind and a respectful outlook. I acknowledge that I am responsible for my own transportation to and from after-school events. I acknowledge if my behavior does not meet club or instructor standards, I will receive a warning. If poor behavior continues, I recognize I may no longer be allowed to participate in the club.

Student Name: _____

Student Signature: _____

Student Number: _____